

Demographic Information form

Please complete the following, circle or tick the most appropriate options

ID number:

Gender: Male ☐ Female ☐

Age:

Time since diagnosis with stroke (stroke survivors only)

Educational level:

Primary school ☐ Secondary school ☐ College ☐ Postgraduate ☐ other:

General health status

Excellent ☐ Very good ☐ Good ☐ Fair ☐ Poor ☐ Other:

Thank you for taking the time to complete this questionnaire